

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

American College of Cardiology Political Action Committee

ADDRESS (number and street)

2400 N St NW

Check if different
than previously
reported. (ACC)

Washington

DC

20037

1153

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00375360

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Quarterly Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 5

2 0 0 8

through

1 2

3 1

2 0 0 8

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Carlton Davids

Signature of Treasurer

Electronically Filed by Carlton Davids

Date

0 1

3 0

2 0 0 9

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	2	5	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		268897.92
(b) Cash on Hand at Beginning of Reporting Period	93216.81	
(c) Total Receipts (from Line 19)	53022.00	415850.14
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	146238.81	684748.06
7. Total Disbursements (from Line 31)	3517.45	542026.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	142721.36	142721.36
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

M M
1 1D D
2 5Y Y Y Y
2 0 0 8

To:

M M
1 2D D
3 1Y Y Y Y
2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	41126.81	326424.87
(i) Itemized (use Schedule A)		
(ii) Unitemized	11273.00	80672.66
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	52399.81	407097.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤	52399.81	407097.53
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	622.19	6252.61
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	53022.00	415850.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	53022.00	415850.14

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1017.45	7217.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	1017.45	7217.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	532209.50
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	2600.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3517.45	542026.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3517.45	542026.70

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	52399.81	407097.53
34. Total Contribution Refunds (from Line 28(d))	0.00	2600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	52399.81	404497.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1017.45	7217.20
37. Offsets to Operating Expenditures (from Line 15, page 3)	622.19	6252.61
38. Net Operating Expenditures (subtract Line 37 from Line 36)	395.26	964.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jay H. Alexander

Mailing Address 2256 Carlyle Court

City

Buffalo Grove

State

IL

Zip Code

60015-1857

FEC ID number of contributing
federal political committee.

C

Name of Employer
North Shore Cardiologists,
SC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 467fbcff3c15089a1de0

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Ashwini R. Anand

Mailing Address 740 Philpot Road

City

London

State

KY

Zip Code

40744-9472

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anand P.S.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 2f37f44a88a7386c84b

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

John S. Aumiller

Mailing Address 1250 Ben Ali Drive

City

Danville

State

KY

Zip Code

40422-8937

FEC ID number of contributing
federal political committee.

C

Name of Employer
Danville Cardiovascular
Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 5bfe9034bfa3e601389

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Timothy M. Bateman

Mailing Address 3410 West 89th Street

City

Leawood

State

KS

Zip Code

64111-5939

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiovascular Consultant-
s, PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 8

Transaction ID: 4ba18448f841b8979caf

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

George P. Bekic

Mailing Address 502 Cherry Lane

City

Lumberton

State

NC

Zip Code

28358-3011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeastern Cardiology,
P.A.

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 3017561237fd9356083

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Alan J. Berrick

Mailing Address 35 Popes Lane

City

Hingham

State

MA

Zip Code

02169-0927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 75ac18c1c807cffad4f

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jonathan J. Berry

Mailing Address 2 Stone Water Place

City

Greensboro

State

NC

Zip Code

27408-3849

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeastern Heart & Vasc-
ular Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 33768af749f348f695e

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Alan D. Bramowitz

Mailing Address 5430 Forbes

City

Pittsburgh

State

PA

Zip Code

15217

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jefferson Card. Assoc.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 1c0e8709084200db309

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Eugenio M. Bricio

Mailing Address 2999 Northeast 191st Suite 330

City

Miami

State

FL

Zip Code

33180-3115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 49fa065ea8f2d04d782

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Alberto A. Brizolaro

Mailing Address 1380 East Medical Center Drive
Suite 1500

City State Zip Code
Saint George UT 84790-2128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southwest Cardiology

Occupation
CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: 8939cf8e7eb98d91ec5

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Alan S. Brown

Mailing Address 1912 Alta Vista Court
801 S Washington Street

City State Zip Code
Naperville IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Midwest Heart Specialists-
Edward Heart

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 4dfc909f46429ff1718f

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Alan S. Brown

Mailing Address 1912 Alta Vista Court
801 S Washington Street

City State Zip Code
Naperville IL 60567

FEC ID number of contributing
federal political committee.

C

Name of Employer
Midwest Heart Specialists-
Edward Heart

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: 4b6a8f823a34d14dd7af

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Harold G. Card

Mailing Address 4 Gatewood Drive

City

Saratoga Springs

State

NY

Zip Code

12866-8624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Saratoga Cardiology Assoc

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 36fba1eab944ce26144

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Hollace D. Chastain

Mailing Address 1819 Breamar Drive

City

Fort Wayne

State

IN

Zip Code

46805-4705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 435ea853439c21a0f293

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Shaukat A. Chaudhery

Mailing Address 42 Throckmorton Lane 2nd Floor

City

Old Bridge

State

NJ

Zip Code

08857-2572

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assoc. in Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: a78953eb5b5e3e452cc

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Richard A. Chazal

Mailing Address 671 North Town and River Drive

City

Fort Myers

State

FL

Zip Code

33908-3630

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Heart Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 4622a447734642e2a6bc

Amount of Each Receipt this Period

84.00

B.

Full Name (Last, First, Middle Initial)

Bernard A. Clark

Mailing Address 95 Johnny Cake Lane

City

Glastonbury

State

CT

Zip Code

06105-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Francis Hospital and
Medical Centre

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 8

Transaction ID: 4fffb0b784cce0621d4

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Arthur W. Colbourn

Mailing Address 104 Haywood Road

City

Wilmington

State

DE

Zip Code

19807-1114

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: f8c07091e3c023e5622

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

634.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

David G. Cziner

Mailing Address 33 Davis Avenue

City

White Plains

State

NY

Zip Code

10605-1030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 8e4807aa90350ad4fa8

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Berge J. Dadourian

Mailing Address 3121 South Maryland Parkway, Suite

City

Las Vegas

State

NV

Zip Code

89109-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nevada Cardiology Associa-
tes

Occupation

INTERNAL MED.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 4b59624b476458bb5b3

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Emilio Del Priore

Mailing Address 3404 Fifth Street

City

Oceanside

State

NY

Zip Code

11572-5137

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

INVASIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 75481aa14079a6f4fcc

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Augustin J. Delago

Mailing Address 2231 Burdett Avenue
Ste 160

City State Zip Code
Troy NY 12180-2462

FEC ID number of contributing
federal political committee.

C

Name of Employer
Albany Medical Ctr

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 5a915ea3ecd12bd43be

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Behrooz Eshaghy

Mailing Address 1111 West Superior Street, Suite 3

City State Zip Code
Melrose Park IL 60160-4156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: cd879273326f8c8d5d3

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Michael D. Evans

Mailing Address 110 Rio Grande Drive

City State Zip Code
Mission TX 78572-7419

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heart Clinic, P.A.

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 84eb5a30c446054e27c

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

James W. Fasules

Mailing Address 6 Cascades Drive
1900 Maryland

City State Zip Code
Little Rock AR 72202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arkansas Children's Hospi-
talPediatric

Occupation
PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 42cda741a2d1da6db270

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

James W. Fasules

Mailing Address 6 Cascades Drive
1900 Maryland

City State Zip Code
Little Rock AR 72202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arkansas Children's Hospi-
talPediatric

Occupation
PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: 42d0bceab568fe3565f7

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Gregory P. Fazio

Mailing Address 500 Shady Dell Road

City State Zip Code
York PA 17403-4426

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiac Diagnostics Assoc.

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: e41a75917c41910d108

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

334.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Daniel J. Fernicola

Mailing Address 3601 Stewart Drwy

City

Chevy Chase

State

MD

Zip Code

20850-0202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiovascular Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 0b5d5297b8fbfd1d26

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Roberto R. Fred Santana

Mailing Address PO Box 756

City

Rio Grande

State

PR

Zip Code

00745-0756

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: f6934a8c333c2e9776e

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Charles E. Fuenzalida

Mailing Address 5301 Preserve Parkway S

City

Littleton

State

CO

Zip Code

80121-2147

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

GENERAL PRACTICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: c107a413172ccc17005

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Michael H. Girolami

Mailing Address 1828 El Camino Real Suite 402

City

Burlingame

State

CA

Zip Code

94010-3115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: bbbc8b0d784a478a2ed

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Frank J. Green

Mailing Address 10590 N Meridian Street

City

Indianapolis

State

IN

Zip Code

46290-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Care Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: 7cc9950200df57dda3

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Glenn A. Harris

Mailing Address Western Carolina Cardiology
32 Physician Drive

City

Clyde

State

NC

Zip Code

28721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Western Carolina Cardiol-
ogy

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: bc2bfe531f266471a58

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mohammed Haseeb

Mailing Address 4204 Williamson Place
PO Box 789

City State Zip Code
Mount Vernon IL 62864-6705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Suite

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: 06707f12642e3b719ee

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Sultan A. Hayat

Mailing Address 4600 Memorial Dr. Suite W 1

City State Zip Code
Belleville IL 62226-5366

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: c514ec0fc57d25d4e0a

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

John C. Henderson

Mailing Address 2900 Hawkins Drive

City State Zip Code
Searcy AR 72143-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer
John C. Henderson, MD, PA

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: b302ed845241d56658a

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

William Y. Hong

Mailing Address 1364 Route 72 W

City

Manahawkin

State

NJ

Zip Code

08050-2485

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stafford Medical PA

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: b777a8edf3109cb68cb

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

David S. Jackson

Mailing Address 11055 Little Patuxent Parkway Suit

City

Columbia

State

MD

Zip Code

21044-2898

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: b379030bd5cbe29852f

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Jay A. Jackson

Mailing Address 3610 Wyncote Lane

City

Shawnee Mission

State

KS

Zip Code

66205-2739

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: e7b90f315879aa9188f

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 19 / 48

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ennis James

Mailing Address 106 Fair Oaks Ln

City

Greenwood

State

SC

Zip Code

29646-9273

FEC ID number of contributing
federal political committee.

C

Name of Employer
American College of Cardi-
ology

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: ff49bd292075f28e481

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

John S. Jones

Mailing Address 834 Kenmore Road

City

Chapel Hill

State

NC

Zip Code

27514-1447

FEC ID number of contributing
federal political committee.

C

Name of Employer
Triangle Heart Associates

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 7796cb66d3e7eb8f4fb

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Anna M. Kalynych

Mailing Address 58 Montclair Drive Northeast

City

Atlanta

State

GA

Zip Code

30309-1527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 1036b1e437a18a8cf40

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Martin M. Kay

Mailing Address 26 Cedar Lane

City

Sandspoint

State

NY

Zip Code

11361-3002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiovascular Associates
of New York

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: d985ed28e9e99e9972f

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mark W. Keller

Mailing Address 5855 S Forest Street

City

Greenwood Village

State

CO

Zip Code

80012-4508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 10d8de3dc99df2d1113

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mohammed Khursheed

Mailing Address 11480 Brookshire Avenue Suite 300

City

Downey

State

CA

Zip Code

90241-5023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: 0932bb8d613fc95207d

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Nicholas I. Kondo

Mailing Address 6 Care Lane

City

Saratoga Springs

State

NY

Zip Code

12866-8624

FEC ID number of contributing
federal political committee.

C

Name of Employer
Saratoga Cardiology Assoc-
iates, PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: 4158e3ae6300ff10915

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Gregory M. Koshkarian

Mailing Address 3350 E Finger Rock Circle
6080 N La Cholla Boulevard

City

Tucson

State

AZ

Zip Code

85741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heart Care of Southern Ar-
izona Desert

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: e5895c20724a29dc7ed

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Christopher J. Leet

Mailing Address 1772 Kingsway Road

City

Norfolk

State

VA

Zip Code

20110-3866

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prince William Cardiology
Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 307e13af2652317a07d

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bernard Levi

Mailing Address 4109 West 110 Terrace

City

Shawnee Mission

State

KS

Zip Code

66209-3721

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 9782c3bc61672c8e10e

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

James R. Licht

Mailing Address 3801 Katella Avenue Suite 401

City

Los Alamitos

State

CA

Zip Code

90720-3375

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiovascular Care, Inc

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: f5d85a9f0a004096305

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Phil Lobstein

Mailing Address 4000 Shadow Drive

City

Fort Worth

State

TX

Zip Code

76104-3915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: ab29e740416cbc47595

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jerre F. Lutz

Mailing Address 4627 Shiloh Ridge Trail

1365 Clifton Road Northeast

City

Snellville

State

GA

Zip Code

30322-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Emory University School
of MedicineDep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ADULT CARDIOLOGY

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 650d2eae61c28759971

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Jamshid Maddahi

Mailing Address 816 North Bedford Drive

City

Beverly Hills

State

CA

Zip Code

90095-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
UCLA School of Medicine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ADULT CARDIOLOGY

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: e336ebbcdba77588357

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Qahtan R. Malki

Mailing Address 3710 21st Street

City

Lubbock

State

TX

Zip Code

79410-1220

FEC ID number of contributing
federal political committee.

C

Name of Employer
Texas Cardiac Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

ADULT CARDIOLOGY

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 82c64bc9c7a748116a8

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Joseph E. Marakovits

Mailing Address 96 Stonehill Drive

City

Rocky Hill

State

CT

Zip Code

06067-4257

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bristol Cardiovascular As-
sociates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: bb6cca2ef8b5d6d6aff

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Norman H. Marcus

Mailing Address 1529 Duxbury Court

City

Allentown

State

PA

Zip Code

18106-0880

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Heart Care Group

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: a3c0ac5ed7b46fb22f1

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Harvey J. Matlof

Mailing Address 1626 Del Dayo Drive

City

Carmichael

State

CA

Zip Code

95608-6052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: f1a52a0bd9121908e10

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

James B. McClurken

Mailing Address Department of Cardiothoracic Surge
3401 N Broad StreetCity State Zip Code
Philadelphia PA 19140-5103FEC ID number of contributing
federal political committee.**C**Name of Employer
Temple University HospitalOccupation
CARDIOVASC. SURG.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 81e41a271d5d630d17c

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Charles R. McKay

Mailing Address 15 Bridlewood Circle

City State Zip Code
Rolling Hills Esta CA 90502-2064FEC ID number of contributing
federal political committee.**C**Name of Employer
Harbor-UCLA Medical CenterOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 9cebb70466fe4ae480f9

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Stephen P. Michaelson

Mailing Address 1177 Summer Street 5th Floor

City State Zip Code
Stamford CT 06905-5522FEC ID number of contributing
federal political committee.**C**Name of Employer
Cardio Assoc of Fairfield
County PCOccupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 1285edfa935acf0366e

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ronald V. Miller

Mailing Address 23755 Woodlynne Drive

City

Bingham Farms

State

MI

Zip Code

48025-3400

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 09d4f0e7b1566b1c401

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Michael J. Mirro

Mailing Address 2005 Prestwick Lane

City

Fort Wayne

State

IN

Zip Code

46805-4705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 40deaea2fc2aea3f3c19

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Michael J. Mirro

Mailing Address 2005 Prestwick Lane

City

Fort Wayne

State

IN

Zip Code

46805-4705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: 4029adfd8a3db1e38e6a

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

John A. Mondelli

Mailing Address 1 Bennington Road

City

Morristown

State

NJ

Zip Code

07960-6125

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morris County Cardiology
Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: cd4685f3823ea2428d0

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Pradip J. Morbia

Mailing Address 415 Kings Row

City

Port Neches

State

TX

Zip Code

77642-2118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gulf Coast Cardiology Gro-
up P.L.L.C

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: b4c9feb8bc0bdf1716f

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Norbert Moskovits

Mailing Address 30 Margaret Avenue

City

Lawrence

State

NY

Zip Code

11559-1826

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: d635b52d78d2151ecb0

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Sanjay D. Naik

Mailing Address 55 First Street Unit 307

City

Pelham

State

NY

Zip Code

10583-5015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scarsdale Cardiology Asso-
ciates, P.C.

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: a5229ebe6262e7436aa

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

M. R. Sasidharan Nair

Mailing Address 660 Holly Road

City

Cadillac

State

MI

Zip Code

49601-2386

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grand Traverse Heart Asso-
ciates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 3493bfd85efa1345c01

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Lawrence G. Narun

Mailing Address 9 Atwater Road

City

Chadds Ford

State

PA

Zip Code

19317-9111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 7ba4dbce1372631a1a0

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Peter S. Nechay

Mailing Address 416 Sapphire Drive

City

Carmel

State

IN

Zip Code

46032-7411

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 75295c9e0e118e08469

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Rick A. Nishimura

Mailing Address 2607 Tuxedo Lane, Northwest

City

Rochester

State

MN

Zip Code

55905-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mayo Clinic Division of Ca-
rdiovascular

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 7 / 2 0 0 8

Transaction ID: 2776b7987ae447cd95da

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Farshad J. Nosratian

Mailing Address 1234 Bel Air Road

City

Los Angeles

State

CA

Zip Code

90077-3016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 9 / 2 0 0 8

Transaction ID: 821fff27dfc559ee89c

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Peter Ott

Mailing Address 2519 East Allen Road

City

Tucson

State

AZ

Zip Code

85716-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: b59c81b129cf5787732

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Neal S. Perlmutter

Mailing Address 1820 9th St. W

City

Kirkland

State

WA

Zip Code

98004-4623

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 328a23dc89ee98dae12

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Joel M. Phares

Mailing Address 820 Egret Cove

City

Biloxi

State

MS

Zip Code

37064-1183

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

INVASIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 33c5f2679aec5bf5045

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Gerald M. Pohost

Mailing Address Division of Crdvsclr Medcn
612 N Las Palmas Avenue

City State Zip Code
Los Angeles CA 90004

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Southern Ca-
liforniaKeck

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: 18ea2769a8b1b5725a1

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Thomas M. Pong

Mailing Address 1638 Escalante Way

City State Zip Code
Burlingame CA 94010-5851

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: 1f7229f524f86736a1a

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Arthur H. Popkave

Mailing Address 1000 Coventry Drive

City State Zip Code
Phillipsburg NJ 08865-1980

FEC ID number of contributing
federal political committee.

C

Name of Employer
Two Rivers Cardiology Ass-
ociates

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: e0aa9c699e754db2d7e

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Peter S. Rahko

Mailing Address G7/343 Csc

600 Highland Avenue

City

Madison

State

WI

Zip Code

53792-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Wisconsin

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 896a2df109ba07df43d

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Peter S. Rahko

Mailing Address 3410 Noll Valley Circle

600 Highland Avenue

City

Verona

State

WI

Zip Code

53792-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Wisconsin

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 96e2a0308adf188968b

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Sanjeev D. Ravipudi

Mailing Address 2317 Deer Creek Court

City

Columbia

State

MO

Zip Code

65201-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Missouri Cardiovascular
Specialists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: fb9c41f050df3e32c3b

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Carl D. Reimers

Mailing Address 130 E 77th Street 9th Floor

City

New York

State

NY

Zip Code

10075-1851

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: d3f057366872c87d7b0

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

William B. Ricks

Mailing Address 17480 High Street

City

Los Gatos

State

CA

Zip Code

95030-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: b191bfa4581a488ad73

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

George P. Rodgers

Mailing Address 2441 Westlake Drive

City

Austin

State

TX

Zip Code

78759-5459

FEC ID number of contributing
federal political committee.

C

Name of Employer
Biophysical Corporation

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 9 / 2 0 0 8

Transaction ID: 4a2ca1140682929593eb

Amount of Each Receipt this Period

85.00

SUBTOTAL of Receipts This Page (optional)

635.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

J. James Rohack

Mailing Address 4409 Leonard Road
2401 S 31st Street

City State Zip Code
Bryan TX 76504-7115

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scott & White Clinic and
Hospital

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 7c10b326ea621f1ad94

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

David A. Rosenbaum

Mailing Address 2835 Halley's Court

City State Zip Code
Colorado Springs CO 80906-1067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pikes Peak Cardiology

Occupation
CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: b5e0b5e052706178d6a

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Tracey Roth

Mailing Address 2053 Mission Drive

City State Zip Code
Naples FL 34109-7108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 2b0bef6edc1467b218a

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Douglas E. Schreck

Mailing Address 13723 Weddington Street

City

Van Nuys

State

CA

Zip Code

91401-5825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	0	8

Transaction ID: 3e9b5fa65266964a916

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James E. Sear

Mailing Address 14041 Grandview

City

Overland Park

State

KS

Zip Code

66221-2026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	0	8

Transaction ID: db90e90111c0cd6b75e

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Larry S. Sidaway

Mailing Address 1906 Ashwood Drive

City

Aberdeen

State

SD

Zip Code

57401-4553

FEC ID number of contributing
federal political committee.

C

Name of Employer
North Central Heart Insti-
tute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	8

Transaction ID: f25eff051c19cf9511a

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Frederick S. Simonie

Mailing Address 10210 North 92nd Street
Suite 205

City State Zip Code
Scottsdale AZ 85258-4524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: 04e6f0288efe051e0e5

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Richard W. Snyder

Mailing Address 5514 Yolanda

City State Zip Code
Dallas TX 75230-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer
Heart Place

Occupation
INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4642.90

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 7 / 2 0 0 8

Transaction ID: 89dc5279978253af2d4

Amount of Each Receipt this Period

357.15

C.

Full Name (Last, First, Middle Initial)

Raymond F. Stainback

Mailing Address 2111 University Boulevard

City State Zip Code
Houston TX 77030-2309

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hall-Garcia Cardiology As-
sociates

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: 19e83593bf63d44f350

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1607.15

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Howard M. Staniloff

Mailing Address 4953 Edgerton Avenue

City State Zip Code
 Encino CA 91436-1201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 1 / 2 0 0 8

Transaction ID: 6d1b36488b60b2e03db

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mark S. Stern

Mailing Address 1520 S Dobson Suite 209

City State Zip Code
 Mesa AZ 85202-4753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tri-City Cardiology Consu-
ltants, P.C.

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 2 5 / 2 0 0 8

Transaction ID: 18ecbe7d7bbe33407fd

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

John S. Strobel

Mailing Address 550 Landmark Avenue

City State Zip Code
 Bloomington IN 47403-3239

FEC ID number of contributing
federal political committee.

C

Name of Employer
Internal Medicine Associa-
tes

Occupation
ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 3 / 2 0 0 8

Transaction ID: bf7dfda7bc92dc13ab2

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Lester E. Suna

Mailing Address 9655 Davis Road

City

Loveland

State

OH

Zip Code

45140-1459

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greater Cincinnati Cardio-
vascular Cons

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 1 / 2 0 0 8

Transaction ID: 5cfc9aac80cea326f1e

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

James D. Thomas

Mailing Address 19755 Chagrin Boulevard
9500 Euclid Avenue

City

Shaker Heights

State

OH

Zip Code

44195-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cleveland Clinic Foundati-
on

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: c0d9efa74a09935e9b2

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Kenneth A. Tjeerdsma

Mailing Address 1090 Pachsama Ct

City

Sioux City

State

IA

Zip Code

51108-8738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiovascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: 0f1ef997b1dca3aa034

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ernesto Umana

Mailing Address 1238 Skip Wells Court

City

Tallahassee

State

FL

Zip Code

32308-4646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southern Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: AFC7E496-D3D9-4A5B-

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Carlos E. Velasco

Mailing Address Wadley Tower, Suite 851
L Box 60, 3600 Gaston Avenue

City

Dallas

State

TX

Zip Code

75246

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baylor Univ. Med. Ctr.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: 218f61f9fc8704eab44

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mary N. Walsh

Mailing Address 428 West 83rd Place

City

Indianapolis

State

IN

Zip Code

46260-1992

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Care Group LLC

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 9 / 2 0 0 8

Transaction ID: 428da70632ddd88713c0

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mason Weiss

Mailing Address 4691 White Oak Avenue

City

Encino

State

CA

Zip Code

91316-3832

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 301f8b54a1b89c05404

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mitchell H. Weiss

Mailing Address 9314 Park West Boulevard Suite 300

City

Knoxville

State

TN

Zip Code

37923-4328

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: 9482949d6dfba4e0ab8

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Steven R. West

Mailing Address Cardiology Consultants of SW Flori
13411 Parker Commons Blvd, Ste 101

City

Fort Myers

State

FL

Zip Code

33912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Consultants of
Southwest Fl

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: eb89f031d87e880ace5

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Steven R. West

Mailing Address Cardiology Consultants of SW Flori
13411 Parker Commons Blvd, Ste 101

City State Zip Code
Fort Myers FL 33912

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology Consultants of
Southwest Fl

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: 0ea947c052477c90660

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Michael J. Wolk

Mailing Address 876 Park Avenue

City State Zip Code
New York NY 10021-8722

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Cardiology Assoc-
iates

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 44ba820a6a567e495f67

Amount of Each Receipt this Period

83.33

C.

Full Name (Last, First, Middle Initial)

Michael J. Wolk

Mailing Address 876 Park Avenue

City State Zip Code
New York NY 10021-8722

FEC ID number of contributing
federal political committee.

C

Name of Employer
New York Cardiology Assoc-
iates

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.63

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: 4df79a946c502753563e

Amount of Each Receipt this Period

83.33

SUBTOTAL of Receipts This Page (optional)

266.66

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Calvin Y. Wong

Mailing Address 550 S Beretania Street Suite 601

City

Honolulu

State

HI

Zip Code

96813-2423

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pacific Cardiology, LLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 8

Transaction ID: 9b8089860e197bd0a85

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Billy K. Yeh

Mailing Address 13145 Old Cutler Road

City

Miami

State

FL

Zip Code

33176-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 8

Transaction ID: de3a1b9de1fe6ad59c1

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

K. George Younan

Mailing Address 717 N Beers Street Suite 2E

City

Holmdel

State

NJ

Zip Code

07733-1525

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 205b2bdebaecbbdd7f

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 48

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Kevin R. Young

Mailing Address 1917 E Rosedown Drive

City

Lake Charles

State

LA

Zip Code

70601-5727

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiovascular Specialist-
sof Southwest

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: 1b0f2c6a661ab1f9083

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Antoine G. Younis

Mailing Address 11403 Memorial Drive

City

Houston

State

TX

Zip Code

77030-2336

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 8

Transaction ID: 2a9ddb799d259d9af48

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Daniel Zanger

Mailing Address 1262 Ocean Parkway

City

Brooklyn

State

NY

Zip Code

11230-5102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 3 / 2 0 0 8

Transaction ID: 418dc3bcde6db305e13

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 48

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Joseph Zebede

Mailing Address 4300 Alton Road Suite 2030

City

Miami Beach

State

FL

Zip Code

33140-2800

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mount Sinai Medical Center

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	8

Transaction ID: a573ca97cca3e4d820c

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

41126.81

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 48

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City

Richmond

State

VA

Zip Code

23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

6252.61

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 8 / 2 0 0 8

Transaction ID: 3c826ec56348afd15c6

Amount of Each Receipt this Period

622.19

Reimburse for Nov. Amex
and Dec. Merchant Fees

SUBTOTAL of Receipts This Page (optional)

622.19

TOTAL This Period (last page this line number only)

622.19

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 / 48

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 53852

City
Phoenix

State
AZ

Zip Code
85072-3852

Purpose of Disbursement
November Amex Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: V22d85f0d5c41b8a4a54

Date of Disbursement

11 / 30 / 2008

Amount of Each Disbursement this Period

194.72

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 53852

City
Phoenix

State
AZ

Zip Code
85072-3852

Purpose of Disbursement
December Amex Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: Vb82c4a22de00737718b

Date of Disbursement

12 / 31 / 2008

Amount of Each Disbursement this Period

395.26

C.

Full Name (Last, First, Middle Initial)

Merchant Services

Mailing Address 7300 Chapman Hwy

City
Knoxville

State
TN

Zip Code
37920

Purpose of Disbursement
December Merchant Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: Me681d66dcae5bcbbd10

Date of Disbursement

12 / 02 / 2008

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional)

594.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 / 48

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

SunTrust Merchant Services

Mailing Address PO Box 6600

City
Hagerstown

State
MD

Zip Code
21741

Purpose of Disbursement
December Merchant Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: Vec499d309000e39e1fc

Date of Disbursement

12 / 10 / 2008

Amount of Each Disbursement this Period

387.92

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address C/O Nova Information Systems
7300 Chapman Hwy

City
Knoxville

State
TN

Zip Code
37920

Purpose of Disbursement
December Merchant Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: M02f43bbdb727873e974

Date of Disbursement

12 / 02 / 2008

Amount of Each Disbursement this Period

34.55

SUBTOTAL of Disbursements This Page (optional)

422.47

TOTAL This Period (last page this line number only)

1017.45

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Fleming for Congress

Mailing Address PO Box 1236
Box 281

City Minden State LA Zip Code 71058

Purpose of Disbursement
2008 General

Candidate Name
John Calvin Fleming, Jr.

Office Sought: ☒ House
☐ Senate
☐ President

State: LA District: 04

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: bfcda627488b3792195

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2008

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00